



Dog Foster Care Application

Thank you for taking the time to fill out this application. Your information will remain confidential and used only as part of the HHMN Foster Care Program.

PERSONAL INFORMATION (Please print):

Name: _____ Age: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Work/Cell phone: _____

Email: _____

How did you hear about us? _____

HOUSEHOLD INFORMATION: How many people are in your household?

Adults over the age of 21 (including self): _____ Ages: _____ Children (under 21): _____ Ages: _____

Does anyone in the household have allergies to dogs? Yes No If yes, who? _____

Do you live in: HOUSE APARTMENT CONDO DUPLEX MOBILE HOME TOWNHOME

Do you: OWN RENT LEASE How long have you been at this address? _____

If renting/leasing, are there pet restrictions? YES NO If yes, what are they? _____

Landlord's name _____ Landlord's phone _____ *If renting, we will contact your landlord to ask if fostering animals in your home is acceptable. You will not be able to foster until we receive positive confirmation.*

Please list all of your current pets:

Dog/Cat	Breed	Name	Age	M/F	Altered?	How long owned?

Please use back of application if you run out of space. We recommend all other animals in your home be up to date on vaccinations. If you have any concerns, please discuss the idea of fostering animals with your veterinarian.

Who will be the primary caretaker of your foster dog(s)? _____

Describe your yard:

No yard _____ Unfenced yard _____ Partially fenced yard _____ Completely fenced yard _____

Height of fence: _____ Made of? Wood Chain link Brick Other _____

HHMN foster dogs and puppies must be supervised at all times when outdoors.

If you don't have a fenced in yard, do you agree to keep your foster dog on leash at all times outside? Yes No

How would you describe your level of experience with dogs? check all that apply

- Never had a dog
- Had childhood pet dog
- Had one or more as an adult
- Have experience with powerful breeds
- Have experience working with on-going medical problems with a personal dog
- Have experience working at a boarding kennel/resort/pet sitting service etc.
- Have experience working with behavioral problems with a personal dog
- Have experience working in a veterinary hospital
- Am a professional dog trainer
- Have previous foster/rescue experience, if yes, please describe: _____

Do you have experience with: small dogs medium dogs large dogs

List experience with specific breeds: _____

What types of dog are you interested in fostering? Check all that apply

- Adult dog
- Puppies
- Mother with nursing puppies
- Unweaned puppies/Bottle babies
- Sick dog/puppy
- Injured dog/puppy
- Dog/puppy with behavioral issues
- Long-term hospice care
- Pit Bull/Bully breeds

How many hours during the AVERAGE day will this dog spend WITHOUT a human? _____

Where will this dog be when someone is home? _____

Where will this dog be when alone? _____ Where will this dog sleep at night? _____

What situations do you feel unprepared for?

- Excessive barking
- Destructive chewing
- Not housetrained
- Digging
- Escaping
- Resource (food/toy) aggression
- Shy, fearful, or undersocialized dog
- Not good with children
- Not good with other dogs
- Not good with small animals/cats
- Scratching/biting
- Administering medications
- Providing on-going training
- Very high activity level
- Deaf/Blind dogs

Do you have a preference on:

Size? YES NO If yes, please list size preference: _____

Breed? YES NO If yes, please list breed you prefer: _____

Age? YES NO If yes, please list age preference: _____

Please tell us anything else you would like us to know to help match you up with the right foster animal:

Staff Notes: _____

Please read the following carefully:

HHMN determines the criteria for fostering, decides which animals are eligible for foster care, and appoints foster caregivers from a pre-approved list of trained providers. HHMN will require you to go fill out a foster application, a Humble Hounds MN Foster Care Agreement, as well as attend a Dog Foster Orientation Class prior to being accepted as a foster parent. HHMN foster care volunteers may always refuse any specific request for any reason. HHMN staff will inform you of any medical treatments to be administered, the anticipated length of the foster-care period, the objectives of each particular placement (restoring to health, rearing to adoptable age, socialization, etc.), and any other restrictions or expectations we may have.

You will be expected to keep the animal safe and secure, return it to HHMN when requested to do so, and not promise the animal to anyone, or imply that you have the authority to approve a potential adoption. HHMN retains ownership of all animals placed in foster care, and will make all decisions regarding the adoption & placement of the animals fostered.

HHMN cannot accommodate people fulfilling court-ordered community service within the Foster Care Program. HHMN does not accept into this program those convicted of violent crimes or crimes involving animal cruelty or neglect. Students seeking credit for school service requirements should speak with the Foster Care Coordinator to discuss the program before proceeding.

Unless otherwise arranged, the foster parent is responsible for providing all food, litter, bedding, and toys for the animal while it is in their care at home. The foster parent is responsible for transporting the animals to and from HHMN for veterinary appointments, surgery, behavior evaluations, vaccinations, etc.,. The foster parent may also be responsible for transporting the animal to and from adoption events, and to off-site training classes, at the Foster Care Coordinator's discretion. Upon return your foster animal to HHMN you will be required to fill out a brief questionnaire about your foster animal's behavior and personality.

I have read and understand the statements above. I certify that all the information contained in this application is true and correct. I understand that although HHMN takes reasonable care to screen animals for foster care placement, it makes no guarantees relating to the animals' health, behavior or actions. I understand that I receive foster care animals at my own risk and can decline to accept any animal for which HHMN has asked me to provide care. I acknowledge that HHMN is not responsible for any property damage or personal injury suffered by me, members of my household, including my own animals, or any third parties during a foster placement, and I assume liability to provide adequate controls to prevent such damage or injury.

Signature

Date

Witnessed By

Date

Return Application to: Humble Hounds MN

Email: info@humblehoundsmn.org